TOWN OF STERLING
Office of the Town Clerk
1 Park Street
Sterling, MA 01564
tel. 978-422-8111 x2307
fax. 978-422-0289
www.sterling-ma.gov/town-clerk

OFFICE HOURS
Mon - Thu: 7:30 - 5:00
Fri: 7:30 - 11:30

DOG LICENSE APPLICATION AND RENEWAL FORM

DUE DATE
April 15, 2021

LICENSING FEES	
Non-altered	$12.00
Altered (spayed or neutered)	$8.00
Senior (70+) or Service	$0.00
Late Penalty after DUE DATE	$25.00
Late Citation, MGL 140 s141 ..	$50.00 or more

If you own a dog, it is time to register or renew your annual dog license.
If you no longer own your dog, please notify the Town Clerk's Office.

BY MAIL or DROP OFF

Complete the application form below, verifying owner information, street address, and pet description(s). Include rabies certificate(s) and a check or money order for the total payable to **Town of Sterling**. Do not send cash. Mail to the Town Clerk or drop off 24/7 at the grey box outside the Butterick Municipal Building at 1 Park Street.

ON-LINE

Purchase or renew licenses online at **www.doglicenses.us/MA/Sterling**. Credit card payments only. Per license convenience fee applies. Rabies certificate(s) may be uploaded, mailed, faxed or emailed to AsstTownClerk@sterling-ma.gov.

Licenses are renewable yearly. Licenses are valid January 1 thru December 31. **No license can be issued for a dog not having a current rabies vaccination.** If you have any questions, please contact **Animal Control at 978-422-7331 or AnimalControl@sterling-ma.gov**.

Color Codes: BL=Black; **WH**=White; **GR**=Gray; **BD**=Brindle; **TA**=Tan; **BR**=Brown; **YE**=Yellow; **RE**=Red; **TRI**=Tri-Color

APPLICATION for the registration of dog(s) for the year 2021

Town of Sterling
1 Park Street; Sterling, MA 01564

Age		Sex	Spay /	Color									Breed	Dog Name	Microchip Number	Rabies Expire (m/d/y)	Fee
YRs	MOs	(M/F)	Neut	BL	WH	GR	BD	TA	BR	YE	RE	TRI					
															Total		

Owner Information

Name: _____

Street Address: _____

Mailing Address: _____
if different (e.g. PO Box)

City: _____ State: _____ ZipCode: _____

Signature of Applicant _____

Date Signed _____

Phone 1 _____ Phone 2 _____

Email _____